# FORM D

PROCESSED APR 2 8 2008

THOMSON REUTERS

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	~ ~ <u> </u>
OMB APE	PROVAL
OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated aver	age burden
hours per respo	onse 16.00

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

Name of Offering (   check if this is an amendment and name has changed, and indicate changed)	
LLC Membership Interests	SEC Mail Processing
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(	6) DULOE Section
Type of Filing: New Filing	
A. BASIC IDENTIFICATION DATA	APR 2 1 2008
Enter the information requested about the issuer	AIN Z
Name of Issuer (  check if this is an amendment and name has changed, and indicate change.)	Washington, DC
LUCP Funding Group I, LLC	111
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
14335 NE 24th Street, Suite 200, Bellevue, WA 98007	(206) 718-4138
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Num
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Brief Description of Business: Fund a Reducing Line of Credit Amount Under a Subordinated	Credit Facility 08046194
Type of Business Organization	
☐ corporation ☐ limited partnership, already formed ☐ other ☐ business trust ☐ limited partnership, to be formed	r (please specify): Limited Liability Company
	ctual
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for Canada; FN for other foreign jurisdiction of CN for CANADA (CN for CANA	

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required : Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: □ Promoter ■ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Gourley, J. Britton Business or Residence Address (Number and Street, City, State, Zip Code) 14335 NE 24th Street, Suite 200, Bellevue, WA 98007 Check Box(es) that Apply: □ Promoter □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Syrek, Richard R. Business or Residence Address (Number and Street, City, State, Zip Code) 740 Springdale Drive, Suite 208, Exton, PA 19341 Director General Director Mail Managing Partner Check Box(es) that Apply: ■ Beneficial Owner □ Executive Officer □ Promoter Full Name (Last name first, if individual) Lunt, Chris Business or Residence Address (Number and Street, City, State, Zip Code) 3462 Route 147, Millersburg, PA 17061 Check Box(es) that Apply: □ Promoter ☑ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Dolphin & Bradbury Inc. 401(k) Profit Sharing Plan 1/1/03, RJ Bradbury TTEE FBO Robert J. Bradbury Acet #4185-4301 Business or Residence Address (Number and Street, City, State, Zip Code) 1601 Pocopson Road, PO Box 1004, Chadds Ford, PA 19317 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

A. BASIC IDENTIFICATION DATA

				В.	INFORMA	TION AB	OUT OFF	ERING				37	
i.	Has the issue	r sold or de	nes the issu	er intend to	sell to nor	n-accredited	l investors i	in this offer	ing?			Yes	No ⊠
	1140 1110 10540				n Appendix							_	_
2.	What is the r	ninimum in			• •	•						\$	50,000
2.	What is the i		vestment in	wiii 00 u	ecopica no	in uny mar	V100017 11111	••••••		•••••		Yes	
3.	Does the offe	ring permit	joint owne	rship of a s	ingle unit?								Ø
4.	Enter the incommission If a person to states, list the a broker or d	or similar r be listed is name of	emuneratio an associa the broker	n for solici ted person or or dealer.	tation of proor agent of If more that	urchasers in a broker or an five (5)	n connectio dealer regi persons to	n with sale stered with be listed a	s of securi the SEC a	ties in the o	offering.		
Full N	ame (Last nar	ne first, if i	ndividual)										
Busine	ess or Residen	ce Address	(Number a	nd Street, C	City, State, 2	Zip Code)							
Name	of Associated	Broker or	Dealer						<del></del>				
States	in Which Per	son Listed I	las Solicite	d or Intend	s to Solicit	Purchasers							
	neck "All Stat											. 🗆 All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	)]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC	<b>)</b> ]
[MT] [RI]		[NV] [SD]	(NH) [TN]	[NJ] [TX]	(NM) [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	(WV)	(OK)	[OR] [WY]	[PA	-
Busine	ess or Residen	ce Address	(Number a	nd Street, C	City, State, 2	Zip Code)							
Name	of Associated	Broker or	Dealer						<del></del>				
States	in Which Per	son Listed I	las Solicite	d or Intend	s to Solicit	Purchasers				<del>.</del>			
(Cl	neck "All State	es" or checl	c individual	States)								. 🗆 All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[II]	)]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	(MN)	[MS]	[MC	
[MT]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(MV)	[OK]	[OR]	[PA	
Full N	[SC] ame (Last nar	(SD)	TN] ndividual)	[TX]	[UT]	[VT]	[VA]	[WA]	(WV)	[WI]	[WY]	[PR	·J
Busine	ess or Residen	ce Address	(Number a	nd Street, (	City, State, 2	Zip Code)							
Name	of Associated	Broker or	Dealer										
States	in Which Per	son Listed I	Has Solicite	d or Intend	s to Solicit	Purchasers							
(Cł	neck "All State	es" or checl	c individual	States)				•••••				. 🗆 All	States
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[II]	
[IL]		[IA]	[KS]	[KY]	(LA)	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	(MC)	
[MT]		[NV] [SD]	(NH) (TN)	[UN] [XT]	(NM) (UT)	(NY) (VT)	[NC] [VA]	(ND) [WA]	(WV)	[OK] [WI]	[OR] [WY]	[PA	

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PRO	CEE	DS			
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \precap \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Tering Price	An	nount Sc	Already ld
	Debt	<b>\$</b>		\$_		
	Equity	\$_		\$_		
	□ Common □ Preferred					
	Convertible Securities (including warrants)	\$_		\$_		
	Partnership Interests	\$_		\$_		
	Other (Specify LLC Membership Interests )	\$_	2,250,000	\$_	2	,250,000
	Total					,250,000
	Answer also in Appendix, Column 3, if filing under ULOE.	_				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number Investors	I	Dollar	gregate Amount rchases
	Accredited Investors	_	14	\$_	7	,250,000
	Non-accredited Investors			\$_		
	Total (for filings under Rule 504 only)			\$_		
	Answer also in Appendix, Column 4, if filing under ULOE.	_				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		Type of	D	ollar	Amount
	Type of Security		Security	_		old
	Rule 505	_		\$_		
	Regulation A	_		\$_		
	Rule 504	_		\$_		
	Total	_		\$_		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$_		
	Printing and Engraving Costs			\$_		
	Legal Fees		⊠	\$_		20,000
	Accounting Fees			\$_		
	Engineering Fees			\$_		
	Sales Commissions (specify finders' fees separately)		0	\$_		
	Other Expenses (identify)			\$_		
	Total		×	S		20,000

_	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND US	E OF P	ROCEEDS		
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C - C proceeds to the issuer."	Question 4.a. This difference is the "adjusted	gross		<b>\$</b>	2,230,000
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part C - 0	y purpose is not known, furnish an estimate the payments listed must equal the adjusted	e and	Payments to Officers,		
				Directors, & Affiliates		Payments To Others
	Salaries and fees		<b></b>		□ \$_	
	Purchase of real estate		□ \$_		□ \$	
	Purchase, rental or leasing and installation of machinand equipment		<b>□</b> \$		<b>_</b> \$	
	Construction or leasing of plant buildings and facilit		_			
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets	or securities of another	_ f			
	issuer pursuant to a merger)		_			
	Repayment of indebtedness		_	•		
	Working capital (Funds raised are being loaned to and					2,230,000
	Other (specify):		□ \$_		□ \$	
			_ \$_		□ <b>s</b>	
	Column Totals		<b>□</b> \$_		□ \$	
	Total Payments Listed (column totals added)			⊠ \$	2,230,	000
		D. FEDERAL SIGNATURE				·
				· cu 1 1 1	D. L. 606	4. 6.11.
ign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-accredite	nish to the U.S. Securities and Exchange (	Commis	ssion, upon writt	en re-qu	est of its staff,
ssu	er (Print or Type)	ignature		Date /		
LU	CP Funding Group I, LLC	15 Jana		4/15	>/0%	Ŷ
		itle of Signer (Print or Type)			-	
J. E	Britton Gourley	Manager				

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 pre provisions of such rule?	esently subject to any of the disqualification	Yes	No ⊠					
	Se	ee Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required by	furnish to any state administrator of any state in which this notice is filed, a notice by state law.	on F	orm D					
3.	The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state administrators, upon written request, information furni	shed l	y the					
4.		uer is familiar with the conditions that must be satisfied to be entitled to the Uniform which this notice is filed and understands that the issuer claiming the availables conditions have been satisfied.							
	ssuer has read this notification and knows the couthorized person.	ontents to be true and has duly caused this notice to be signed on its behalf by the	under	signed					
Issue	(Print or Type)	Signature Date							
LUC	P Funding Group I, LLC	15 July 4/18/08							
Name	of Signer (Print or Type)	Title of Signer (Print or Type)							

Manager

#### Instruction:

J. Britton Gourley

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1		2	3	<del>.</del> .		4		<u> </u>	5
	Intend to non-a	to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type o amount pu (Part		Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Number of Number of Accredited Non-Accredited				No
AL				:	· •				
AK									ı
AZ			1						
AR						-			
CA		х	\$2,250,000 LLC Membership Interests	4	\$300,000				x
СО									
СТ									
DE					-				
DC									
FL									
GA									
НІ									
ID									
IL									
IN									
lA									
KS									
KY						<u>-</u> .			
LA									
ME									
MD									
МА		х	\$2,250,000 LLC Membership Iinterests	1	\$100,000				х
МІ									
MN									

#### APPENDIX 2 3 4 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach offering price explanation of to non-accredited Type of investor and amount purchased in State offered in state waiver granted) investors in State (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) Number of Number of Non-Accredited Accredited Investors Amount Investors Amount Yes No State Yes No MS MO MTNE NVNH NJ NM NY NC ND ОН ΟK OR \$2,250,000 LLC Membership \$1,250,000 X X 5 PA Interests RI SC SD TN \$2,250,000 X LLC Membership 1 \$200,000 X TXInterests UT VT٧A

\$400,000

 $\mathbf{X}$ 

3

WA

\$2,250,000 LLC Membership

Interests

 $\mathbf{X}$ 

				APP	ENDIX			-	
1	Intend to non-a	to sell ccredited s in State -ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pi	4  f investor and urchased in State t C-Item 2)	-	under Sta (if yes explan waiver	ification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No	(Tare C-nem 1)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
wv									
WI									
WY									
PR									